



**World Health
Organization**

Side Event: UN High Level Meeting on TB

Wednesday, 26 September 2018, 7:30 AM - 9:30 AM

Leave no one behind

Scaling up integrated people-centred TB/HIV care towards universal health coverage

On the morning of the historic UN General Assembly High-Level Meeting on Ending TB on 26 September 2018, WHO, in collaboration with AFEW, AidsFonds, FIND, GFAN, KNCV, and UNAIDS, and co-hosts Japan and the Kingdom of the Netherlands, convened a breakfast event focusing on the need to scale up integrated, community-based care for TB and HIV to reach SDG targets of ending TB and AIDS by 2030.

HIV continues to pose a significant challenge to the TB response, and similarly, TB continues to undermine advances made in the HIV response. In the era of ART scale-up TB is still the main cause of hospitalization and in-hospital mortality among people living with HIV. In 2017 a third of all HIV-related deaths were due to TB and around half the people living with HIV estimated to have fallen ill with TB did not reach care.

This important event brought together political leaders, international agencies, implementing partners and affected communities to explore the barriers, gaps and opportunities to achieve an effective, sustained, and coordinated response to HIV and TB that delivers quality community-based integrated TB and HIV care within the framework of Universal Health Coverage and leaving no one behind, and to revitalize shared commitments and renewed action.

Moderated by James Chau, the UN ambassador for SDGs and Global Health, the speakers included: WHO's Director General, Dr Tedros Adhanom Ghebreyesus; Michel Sidibe, Executive Director of UNAIDS; and representatives from the host governments (Netherlands, Japan), civil society, governments from South Africa and Nigeria; FIND, KNCV, PEPFAR, the Stop TB Partnership, The Global Fund, and USAID.

During the event community representatives, Carol Nyirenda and Anton Basenko emphasized the importance of integrated TB and HIV services tailored to the client rather than the services. This was reiterated by the Director General of WHO: "We need new service delivery models based around what communities themselves say they need, not

what others decide they should have; and a commitment to universal health coverage that provides integrated services for TB, HIV, and every other health issues.” He also emphasized the importance of new and improved medicines and diagnostics.

Meeting participants called for political commitment to break the one client-two clinics mould and ensure joint planning and coordination between TB and HIV programmes to aid integrated person-centred care that leaves no one behind, and addresses social factors such as stigma, discrimination and poverty. It was further stressed that communities should remain at the centre of the response and engaged at every level, including ensuring accountability.

During the UN General Assembly High-Level Meeting Member States signed up to a number of commitments in the [Political Declaration on the Fight against Tuberculosis](#) that, if implemented, will have a considerable impact on HIV-associated TB. The commitments included providing diagnosis and treatment with the aim of successfully treating 40 million people from 2018 to 2022; providing preventive treatment to at least 30 million people, including 6 million people living with HIV by 2022; coordination and collaboration between TB and HIV programmes, as well as other health programmes and sectors, to ensure universal access to integrated prevention, diagnosis, treatment and care services; and addressing tuberculosis prevention, diagnosis, treatment and care in children, including among children living with HIV. A recording of the UN High-Level Meeting can be found at the following [link](#).

